IN THE SPECIFICATION:

On page 2, please amend paragraphs [0007] and [0008] as follows:

[0007] Figure 3 is a perspective view of yet another embodiment of the present invention; and

[0008] Figure 4 is a perspective view of yet another embodiment of the present invention;

On pages 2-3, please amend paragraph [0009] as follows:

[0009] The device or curved dilator 100 creates and a step or gradually dilates an opening in body tissue. In the preferred embodiment, the device 100 creates and step dilates an opening in the interspinous ligament. Referring to Figure 1, the device 100 has an elongated body 102, a handle 104 and a tapered curved tip 106. The elongated body 102, including the tapered curved tip 106, is manufactured out of material such as, but not limited to, titanium-6A1-4V EL1 alloy which conforms to ASTM Standard F136-96; Standard Specification Wrought Titanium 6 Aluminum 4 Vandium Vanadium ELI (Extra Low Interstitial) Alloy (R56401) for surgical implant applications.

On pages 4 and 5, please amend paragraph [0013] as follows:

[0013] A physician can insert the first end 110 of first device 100 into the interspinous ligament to create an opening. By urging the curved tip 106 further into the interspinous ligament, up to the second end 108, the opening is dilated to three millimeters. Generally, an implant device has a spacer with a diameter larger than three millimeters, and thus the physician will remove the first device 100 from the opening and select a second device 200. As the opening is at three millimeters, the physician should select a second device 200 where the first end 210 has a diameter of three millimeters and a second end 208 having a diameter of six millimeters. By inserting the second device 200 into the opening, the larger diameter curved

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tip 206 will further dilate the opening. This process should continue until the diameter of the opening is substantially the same as the diameter of the device to be implanted within the patent patient. The diameter of the opening is the diameter of the curved tip 206.

On pages 5-6, please amend paragraph [0015] as follows:

[0015] Accordingly, the invention of the device can be used for an inventive method of dilation. The method includes making an incision in the patient and inserting the curved tip 106 of the tool preferably perpendicular to the back in a direction from a posterior position to an anterior position. The tip106 tip 106 is then preferably inserted perpendicularly until it comes into the region above the interspinous ligament that is to be dilated. At that point, the tip 106 is substantially parallel to the ligament that is to be dilated. The handle of the device 100 would then be rotated and/or pivoted as the tip 106 is then urged into the interspinous ligament up to the second end 108. The device 100 can then be removed. Should further dilation be required, subsequent devices 100 with larger curved tips can be used.